BetsyAnn Wrask, Clerk Nigel Hicks-Tibbles, First Assistant Clerk Alona Tate, Second Assistant Clerk Theresa Utton-Jerman, Journal Clerk Chris Ditmeyer, Clerk Associate



House of Representatives State House Montpelier, VT 05633-5501 Tel: (802) 828-2247 House Staff@leg.state.vt.us

VERMONT HOUSE OF REPRESENTATIVES

OFFICE OF THE CLERK OF THE HOUSE

House of Representatives Disclosure Form House Rule 90(b)(1)(C)

| Name: Cau lifford | _ | | |
|--|----|--------------------------------|-----------|
| I serve on, or am a member of, the following board are regulated by law or that receive funding from t | | ssions, or similar enti | ties that |
| | | Remuneration | |
| Board, Commission, or Similar Entity Name and Position (e.g. Member or Chair) | No | Yes Only Expenses e.g. mileage | Yes |
| | | | |
| | | | |
| | | | |
| | | | |
| My Employer: Reticed | _ | | |
| (Salary disclosure not required) | | | |
| | | | |
| Signed this 4th day of Junery, 2023 | | | |
| | | | |
| Paul Clifford | | | |
| Printed Name (please sign on back) | | | |
| | | | |